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- ☒ ATTN: BOX PATENT APPLICATION
☐ ATTN: BOX DESIGN PATENT APPLICATION
☐ ATTN: BOX PCT
☐ ATTN: BOX PROVISIONAL PATENT APPLICATION
☐ THIS IS THE 35 U.S.C 371 NATIONAL STAGE OF _____ FILED

Sir:

Transmitted herewith for filing is the ☒ Utility ☐ Design ☒ nonprovisional ☐ provisional patent application of:

Inventor / Application Identifier: **Masanobu IWASA, et al.**

☐ See Inventor Information Sheet attached

For: **A MEDICINE BAG**

- ☒ This is a new patent application.
☐ This is the 35 U.S.C. 371 National Stage Application of the above-identified PCT Application.
☐ This is a provisional patent application.
☐ This is a: ☐ Continuation Application
☐ Divisional Application
☐ Continuation-in-Part Application
of prior Application Serial No. ____
☐ Cancel in this application original claims ____ of the prior application before calculating the filing fee.
☐ Amend the specification by inserting before the first line the sentence:
-- This is a ☐ Continuation, ☐ Divisional, ☐ Continuation-in-part, of Application

☐ Incorporation By Reference. The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.

ENCLOSED ARE THE FOLLOWING:		
<input checked="" type="checkbox"/>	22	Sheets of drawings (<input checked="" type="checkbox"/> formal <input type="checkbox"/> informal size A4).
<input checked="" type="checkbox"/>	93	Pages of specification including abstract and claims.
<input checked="" type="checkbox"/>	115	Total pages.
<input checked="" type="checkbox"/>	Combined Declaration and Power of Attorney	
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Newly executed
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Copy from prior application
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Inventors deleted; see attached statement
<input type="checkbox"/>	Sequence Listing	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Computer Readable Copy
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Paper copy
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Statement verifying identity of above copies
<input checked="" type="checkbox"/>	Return Receipt Postcard	
<input type="checkbox"/>	Preliminary Amendment	
<input checked="" type="checkbox"/>	Assignment to: NIPRO CORPORATION	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Assignment is of record in prior application Serial No. .
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Assignment Recordation Form Cover Sheet.
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Charge \$40.00 to Deposit Account No. 10-1250 for recording Assignment.
<input type="checkbox"/>	Information Disclosure Statement	
<input type="checkbox"/>	Information Disclosure Citation	
<input type="checkbox"/>	English translation	
<input checked="" type="checkbox"/>	Application Data Sheet	

PRIORITY CLAIMS	
	Applicant hereby claims the benefit of the filing date of the following provisional application(s) under the provision of 35 USC 119.
X	<p>Applicant hereby claims the benefit under the provisions of 35 USC 119 of the filing dates of the following applications as indicated below:</p> <p>Japan Patent Appln. No. 2003-086270, filed March 26, 2003, Priority Claimed Japan Patent Appln. No. 2003-092661, filed March 28, 2003, Priority Claimed Japan Patent Appln. No. 2003-101632, filed April 4, 2003, Priority Claimed</p> <p>of which certified copies thereof</p>
	will follow
X	are enclosed
	have been filed in the International Bureau
	were filed in prior application:

CLAIMS FILED AND FILING FEE CALCULATION					
ITEM	---			Rate	Applied Fee
[X] Base Fee - Non PCT	--			\$770	\$770
[] Base Fee - PCT IPEA-US	---			\$730	
[] Base Fee - PCT ISA-US	--			\$770	
[] Base Fee - PCT not ISA or IPEA	---			\$1,080	
[] Base Fee - PCT with EPO or JPO Search Report	---			\$920	
[] Base Fee - Design	---			\$340	
[] Base Fee - Provisional	---			\$160	
Claim Fees	Number Filed	Base Number	Number Extra over Base		
Total Claims	25	20	5	\$18	\$90
Independent Claims	1	3	0	\$86	\$0
Multiple Dependent Claim Fee	---			\$290	\$0
[] Small Entity Status is Asserted	---				(\$0)
[] Foreign Language Filing Fee	---			\$130	\$0
TOTAL FILING FEE					\$860

- [X] Please charge Deposit Account No. 10-1250 in the amount of the above TOTAL FILING FEE. A duplicate copy of this sheet is attached.
- [X] Please charge to Deposit Account No. 10-1250 any further fees due for filing or during prosecution of this application under: 37 CFR 1.16; 37 CFR 1.17; and 37 CFR 1.492.

JORDAN AND HAMBURG LLP

By 

Frank J. Jordan

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Attorney for Applicants